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IAB CASE NO. SH2313309

OFFICER INVOLVED SHOOTING FORM AND INVESTIGATIVE SUMMARY

INTERVIEWS

Deputy Joseph Baclawski
Deputy Mike Wilber
Deputy Dana Vilander
Deputy [REDACTED]
Deputy Ervin Francois
Deputy Garrick Twedt
Deputy [REDACTED]
Deputy Juan Rodriguez
Deputy Dan Ferrell
Deputy Kevin Brown
Deputy Carlos Lopez
Deputy Leo Foisner
Deputy John Montenegro
Sergeant Anthony Baudino
Deputy Ian Stade
Deputy Christopher Smelser
Deputy [REDACTED]

Suspect Aaron Collins
Suspect Carlos Mercado

EXHIBITS

- A- Homicide Book
- B- Search Warrant Preparation Check List
- C- SEB After Action Report
- D- Firearms examination reports
- E- Compact disc containing the crime scene photos
- F- Crime scene sketches and legends

MISCELLANEOUS DOCUMENTS

- Signed Witness Admonitions
- Criminal History Reports for Suspect Collins

Los Angeles County Sheriff's Department

Officer Involved Shooting

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Report Date: May 29, 2012		Bureau/Station/Facility: Special Enforcement Bureau		Admin. Invest? <input type="checkbox"/> Hit? <input type="checkbox"/>	
Incident Information					
URN: 012-00049-3199-055		Date: May 25, 2012		Time: 0450 hours	
City or Station: Wilmington		Nature of Incident: Special Enforcement Bureau deputies were struck by bullet fragments when the suspects shot at them while they were serving a search warrant.			
Location: ████████ Ronan Avenue					
Location Type (circle one or more): Backyard Beach Business Freeway Industrial Park Parking Lot <u>Residence</u> Rural School Street Other: _____		Lighting (circle only one): <u>Darkness</u> Daylight Other Street Lights Weather (circle only one): <u>Clear</u> <u>Cloudy</u> Fog Rain Distance: _____		Incident Type (circle one or more): Accidental <u>Armed Person</u> Fleeing Suspect Foot Pursuit Gun Take Away Moving Vehicle Sniper/Ambush Startle Struggle Involved Traffic Stop Unarmed Person Unintentional Vehicle Pursuit <u>Warrant Service</u> Warning Shot Other: _____	
Total # of Shots Fired by Deputy 9		Total # of Shots Fired by Suspect		Initiated by (circle only one): Arrest Warrant Call Observation One Person Unit <u>Other</u> <u>Search Warrant</u> Two Person Unit Prior Activity (circle only one): <u>Detective</u> Inmate Transport Other Routine Patrol Aero Unit? <input type="checkbox"/> Canine Unit? <input type="checkbox"/>	
Employee Witnesses					
Employee #	Last Name	First Name	M.I.	ShiftTime (circle only one):	ShiftType (circle only one):
████████	Baclawski	Joseph		EM PM <u>Day</u>	<u>Regular</u> Overtime Off Duty
Employee #	Last Name	First Name	M.I.	ShiftTime (circle only one):	ShiftType (circle only one):
████████	Wilber	Michael	R.	EM PM <u>Day</u>	<u>Regular</u> Overtime Off Duty
Employee #	Last Name	First Name	M.I.	ShiftTime (circle only one):	ShiftType (circle only one):
████████	Vilander	Dana	R.	EM PM <u>Day</u>	<u>Regular</u> Overtime Off Duty
Non-Employee Witnesses					
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Supervisors					
Employee #	Last Name	First Name	M.I.	(circle one or more):	
████████	Baudino	Anthony	J.	<u>On Duty</u> Witness to shooting <u>Present during shooting</u> <u>Involved in shooting</u>	
Employee #	Last Name	First Name	M.I.	(circle one or more):	
				<u>On Duty</u> Witness to shooting <u>Present during shooting</u> <u>Involved in shooting</u>	
Watch Sergeant					
Employee #	Last Name	First Name		M.I.	
-----	-----	-----		-----	
Watch Commander					
Employee #	Last Name	First Name		M.I.	
████████	Vera	Eliezer			

PSTD Use Only	
SH #	2313309

Rollout Information				
Arrival Date	May 25, 2012	Arrival Time	0715	Date Submitted
Employee #		Last Name	Libertone	First Name
Employee #		Last Name	Allen	First Name
Employee #		Last Name	Smeltzer	First Name
Shooting / Force Information				

Method

(AW)	Arwen	(OV)	Other Weapon: Vehicle
(BC)	Baton:(Control)	(OB)	Other Weapon: Blunt Object
(BI)	Baton:(Impact)	(OO)	Other Weapon: Other
(BF)	Bodily Fluids	(PK)	Personal Weapon: Feet/Leg: (Kick)
(CN)	Canine	(PS)	Personal Weapon: Feet/Leg: (Sweep)
(CR)	Carotid Restraint	(PH)	Personal Weapon (Hand/Arm)
(CH)	Choke Hold	(PP)	Personal Weapon (Push)
(CT)	Control Holds:(Control Techniques)	(PO)	Personal Weapon (Other)
(TT)	Control Holds:(Team Takedown)	(RS)	Resistance
(TD)	Control Holds:(Takedown)	(CN)	Restraint Device (Capture Net)
(CE)	Chemical	(RH)	Restraint Device (Handcuffs)
(OC)	Chemical Agents (OC Spray)	(HB)	Restraint Device:Hobble (Legs Only)
(TG)	Chemical Agents (Tear Gas)	(TP)	Restraint Device:Hobble (TARP)
(EX)	Explosives	(RE)	Restraint Device: REACT Belt
(FH)	Firearm (Handgun)	(SP)	Sap
(FR)	Firearm (Rifle)	(SH)	Shield
(FS)	Firearm (Shotgun)	(SG)	37mm Stinger
(FO)	Firearm (Other)	(SB)	Sting Ball
(FB)	Flashbang	(ST)	Stun Bag
(FL)	Flashlight	(TR)	Taser
(OE)	Other Weapon: Edged	(UC)	Uncooperative

Type of Injury

(AB)	Abrasion
(BR)	Bruise
(BU)	Burn
(CP)	Complaint of Pain
(CO)	Concussion
(DH)	Death
(DI)	Dislocation
(DB)	Dog Bite
(FR)	Fractures
(GS)	Gunshot
(HB)	Human Bite
(LC)	Lacerations
(ND)	Nerve Damage
(OD)	Organ Damage
(PA)	Paralysis
(PW)	Puncture Wound
(SD)	Soft Tissue Damage
(ST)	Sprain/Twists
(UN)	Unconscious
(RM)	Refused Med Treatment
(NN)	NONE

Body Part Injured

(AD)	Abdomen
(AK)	Ankle
(AR)	Arm
(BK)	Back
(BT)	Buttocks
(CH)	Chest
(EL)	Elbow
(FA)	Face
(FE)	Feet
(FI)	Fingers
(GE)	Genitals
(GR)	Groin
(HD)	Hand
(HE)	Head
(HI)	Hip
(IN)	Internal
(KN)	Knees
(LE)	Leg
(NK)	Neck
(SH)	Shoulder
(WR)	Wrist

Brand

(AK)	AK-47	(IV)	Iver Johnson	(RI)	RGI
(BN)	Benelli	(JE)	Jennings	(RO)	Rossi
(BR)	Beretta	(LO)	Lorcin	(SVW)	Smith & Wesson
(BW)	Browning	(LU)	Luger	(SR)	Sturm Ruger
(CH)	Charter Arms	(MA)	Marlin	(ST)	Sterling
(CO)	Colt	(MO)	Mossberg	(TA)	Taurus
(DA)	Davis Industries	(NC)	NCI aka SKS	(WE)	Weatherby
(GL)	Glock	(NA)	North American	(WN)	Winchester
(HA)	Harrington & Richardson	(NO)	Norinco	(US)	US Government
(HI)	Hi Standard	(RA)	Raven	(YY)	Handmade (Inmate)
(HK)	H & K	(RM)	Remington	(XX)	Homemade (Non-Inmate)
(IT)	Ithica	(RG)	RG	(ZZ)	Other Brand

Caliber

(9) 9 mm	(24) .243 caliber	(41) .410 gauge
(10) 10 mm	(25) .25 caliber	(44) .44 caliber
(12) 12 gauge	(30) .308 caliber	(45) .45 caliber
(20) 20 gauge	(35) .357 caliber	(50) 50 mm
(21) 22-250	(36) 30-60 caliber	(SL) Slug
(22) .22 caliber	(38) .38 caliber	(WW) Other caliber
(23) .23 caliber	(40) .40 caliber	

FORCE APPLIED (one code per block)

[illegible]

Officer Involved Shooting Involved Employee Information

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Involved Employee

E 1	Employee # [REDACTED]	Last Name Stade	First Name Ian	M.I. M.
Sex: M Race: W		Rank Deputy	Unit Assignment: SEB	Work Assignment (Unit #, Module, etc.): Blue Team / Scout
ShiftTime (circle only one): (EM) PM Day		ShiftType (circle only one): (Regular) Overtime Off Duty	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used: -----
Hospital Admission? <input type="checkbox"/>		Hospital Name: -----	Coroner Case? <input type="checkbox"/>	Coroner Case # ----- Interviewed? <input checked="" type="checkbox"/>
Hrs of sleep prior to shooting: 5		Duty Time (hrs): [REDACTED]	Clothing (circle only one): Plain Clothes no Vest Raid Jacket w/ Vest Plain Clothes w/ Vest Uniform no Vest Raid Jacket no Vest Uniform w/ Vest	
Age: [REDACTED] Height: 601 Weight: 230		Other Factors: -----		
Range Qualification Date: [REDACTED]		PPC Qualification Date: [REDACTED]	Laser Training Date: [REDACTED]	
Certified with Weapon Used? [REDACTED]		Patrol Certification? [REDACTED]	Certification Unit: [REDACTED]	Prior Shootings? [REDACTED] Number of Prior Shootings: [REDACTED] Directed Force: <input type="checkbox"/>
Weapons Fired Brand: H&K		Caliber 9mm # Shots 1	Weapons Fired Brand: ----- Caliber ----- # Shots -----	
Field Training Officer Emp # [REDACTED] Name [REDACTED]		First Name [REDACTED] M.I. [REDACTED]		
Field Training Officer Emp # [REDACTED] Last Name [REDACTED]		First Name [REDACTED] M.I. [REDACTED]		

E 2	Employee # [REDACTED]	Last Name Smelser	First Name Christopher	M.I. J.
Sex: M Race: W		Rank Deputy	Unit Assignment: SEB	Work Assignment (Unit #, Module, etc.): Blue Team / Back-up Scout
ShiftTime (circle only one): (EM) PM Day		ShiftType (circle only one): (Regular) Overtime Off Duty	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used: -----
Hospital Admission? <input type="checkbox"/>		Hospital Name: -----	Coroner Case? <input type="checkbox"/>	Coroner Case # ----- Interviewed? <input checked="" type="checkbox"/>
Hrs of sleep prior to shooting: 8		Duty Time (hrs): [REDACTED]	Clothing (circle only one): Plain Clothes no Vest Raid Jacket w/ Vest Plain Clothes w/ Vest Uniform no Vest Raid Jacket no Vest Uniform w/ Vest	
Age: [REDACTED] Height: 603 Weight: 235		Other Factors: -----		
Range Qualification Date: [REDACTED]		PPC Qualification Date: [REDACTED]	Laser Training Date: [REDACTED]	
Certified with Weapon Used? [REDACTED]		Patrol Certification? [REDACTED]	Certification Unit: [REDACTED]	Prior Shootings? [REDACTED] Number of Prior Shootings: 2 Directed Force: <input type="checkbox"/>
Weapons Fired Brand: H&K		Caliber 9mm # Shots 2	Weapons Fired Brand: ----- Caliber ----- # Shots -----	
Field Training Officer Emp # [REDACTED] Last Name [REDACTED]		First Name [REDACTED] M.I. [REDACTED]		
Field Training Officer Emp # [REDACTED] Last Name [REDACTED]		First Name [REDACTED] M.I. [REDACTED]		

E 3	Employee # [REDACTED]	Last Name [REDACTED]	First Name [REDACTED]	M.I. O.
Sex: M Race: H		Rank Deputy	Unit Assignment: [REDACTED]	Work Assignment (Unit #, Module, etc.): [REDACTED]
ShiftTime (circle only one): (EM) PM Day		ShiftType (circle only one): (Regular) Overtime Off Duty	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used: -----
Hospital Admission? <input type="checkbox"/>		Hospital Name: -----	Coroner Case? <input type="checkbox"/>	Coroner Case # ----- Interviewed? <input checked="" type="checkbox"/>
Hrs of sleep prior to shooting: 3		Duty Time (hrs): [REDACTED]	Clothing (circle only one): Plain Clothes no Vest Raid Jacket w/ Vest Plain Clothes w/ Vest Uniform no Vest Raid Jacket no Vest Uniform w/ Vest	
Age: [REDACTED] Height: 509 Weight: 170		Other Factors: -----		
Range Qualification Date: [REDACTED]		PPC Qualification Date: [REDACTED]	Laser Training Date: 03/14/12	
Certified with Weapon Used? [REDACTED]		Patrol Certification? [REDACTED]	Certification Unit: [REDACTED]	Prior Shootings? [REDACTED] Number of Prior Shootings: [REDACTED] Directed Force: [REDACTED]
Weapons Fired Brand: H&K		Caliber 9mm # Shots 3	Weapons Fired Brand: ----- Caliber ----- # Shots -----	
Field Training Officer Emp # [REDACTED] Last Name [REDACTED]		First Name [REDACTED] M.I. [REDACTED]		
Field Training Officer Emp # [REDACTED] Last Name [REDACTED]		First Name [REDACTED] M.I. [REDACTED]		

Officer Involved Shooting Involved Employee Information

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Involved Employee											
E 4	Employee #		Last Name			First Name		M.I.			
			Baudino			Anthony		J.			
	Sex: M W		Rank		Unit Assignment:		Work Assignment (Unit #, Module, etc.):				
			Sergeant		SEB		Blue Team / Team Leader				
	ShiftTime (circle only one):		ShiftType (circle only one):		Intoxication/Drug Usage?		Substance Used:				
	EM PM Day		Regular Overtime Off Duty		<input type="checkbox"/>		-----				
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input checked="" type="checkbox"/>		
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one):		Other Factors:				
	4-5				Plain Clothes no Vest Raid Jacket w/ Vest						
	Age: Height: Weight:		2510 175		Plain Clothes w/ Vest Uniform no Vest						
				Raid Jacket no Vest Uniform w/ Vest							
Range Qualification Date:		PPC Qualification Date:		Laser Training Date:							
Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>		Number of Prior Shootings: 2		Directed Force: <input type="checkbox"/>	
Weapons Fired Brand: H&K		Caliber: 9mm		# Shots: 3		Weapons Fired Brand:		Caliber:		# Shots:	
Field Training Officer Emp #		Last Name		First Name		M.I.					
Field Training Officer Emp #		Last Name		First Name		M.I.					
E	Employee #		Last Name			First Name		M.I.			
	Sex: Race:		Rank		Unit Assignment:		Work Assignment (Unit #, Module, etc.):				
	ShiftTime (circle only one):		ShiftType (circle only one):		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:				
	EM PM Day		Regular Overtime Off Duty		<input type="checkbox"/>						
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input type="checkbox"/>		
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one):		Other Factors:				
					Plain Clothes no Vest Raid Jacket w/ Vest						
	Age: Height: Weight:				Plain Clothes w/ Vest Uniform no Vest						
				Raid Jacket no Vest Uniform w/ Vest							
Range Qualification Date:		PPC Qualification Date:		Laser Training Date:							
Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>		Number of Prior Shootings:		Directed Force: <input type="checkbox"/>	
Weapons Fired Brand:		Caliber		# Shots		Weapons Fired Brand:		Caliber		# Shots	
Field Training Officer Emp #		Last Name		First Name		M.I.					
Field Training Officer Emp #		Last Name		First Name		M.I.					
E	Employee #		Last Name			First Name		M.I.			
	Sex: Race:		Rank		Unit Assignment:		Work Assignment (Unit #, Module, etc.):				
	ShiftTime (circle only one):		ShiftType (circle only one):		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:				
	EM PM Day		Regular Overtime Off Duty		<input type="checkbox"/>						
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input type="checkbox"/>		
	Hrs of sleep prior to shooting:		Duty Time (hrs):		Clothing (circle only one):		Other Factors:				
					Plain Clothes no Vest Raid Jacket w/ Vest						
	Age: Height: Weight:				Plain Clothes w/ Vest Uniform no Vest						
				Raid Jacket no Vest Uniform w/ Vest							
Range Qualification Date:		PPC Qualification Date:		Laser Training Date:							
Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>		Number of Prior Shootings:		Directed Force: <input type="checkbox"/>	
Weapons Fired Brand:		Caliber		# Shots		Weapons Fired Brand:		Caliber		# Shots	
Field Training Officer Emp #		Last Name		First Name		M.I.					
Field Training Officer Emp #		Last Name		First Name		M.I.					

Officer Involved Shooting Suspect Information

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Suspect Information

S 1	Last Name Collins		First Name Aaron		M.I. P.
	AKA Last Name		First Name		M.I.
	Sex: M Race: B	Street Address: [REDACTED]		City [REDACTED]	State & Zip Code: [REDACTED]
	Work Phone: [REDACTED]	Home Phone: [REDACTED]	Social Security #: [REDACTED]	Driver's License #: [REDACTED]	
	Age: 28 D.O.B. 02-18-1984	Height: 601 Weight: 163	FBI # [REDACTED]	CII # [REDACTED]	
	Booking # 3169566	Primary Charge: 664/187(a) PC		Secondary Charge:	
	Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used:	
	Armed? <input checked="" type="checkbox"/>	Apprehended? <input checked="" type="checkbox"/>	Mental Illness? <input type="checkbox"/>	Criminal History? <input type="checkbox"/>	
	Vehicle Make		Model:	Year:	

S 2	Last Name Mercado		First Name Carlos		M.I.
	AKA Last Name		First Name		M.I.
	Mercado Jr.		Carlos		
	Sex: M Race: H	Street Address: [REDACTED]		City [REDACTED]	State & Zip Code: [REDACTED]
	Work Phone: [REDACTED]	Home Phone: [REDACTED]	Social Security #: [REDACTED]	Driver's License #: [REDACTED]	
	Age: 27 D.O.B. 12-17-1984	Height: 508 Weight: 245	FBI # [REDACTED]	CII # [REDACTED]	
	Booking # 3169570	Primary Charge: 11351 H&S		Secondary Charge: 11370.1(a) H&S	
	Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used:	
	Armed? <input checked="" type="checkbox"/>	Apprehended? <input checked="" type="checkbox"/>	Mental Illness? <input type="checkbox"/>	Criminal History? <input type="checkbox"/>	
	Vehicle Make		Model:	Year:	

S	Last Name		First Name		M.I.
	AKA Last Name		First Name		M.I.
	Sex: Race:	Street Address:		City	State & Zip Code:
	Work Phone:	Home Phone:	Social Security #:	Driver's License #:	
	Age: D.O.B.	Height: Weight:	FBI #	CII #	
	Booking #	Primary Charge:		Secondary Charge:	
	Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used:	
	Armed? <input type="checkbox"/>	Apprehended? <input type="checkbox"/>	Mental Illness? <input type="checkbox"/>	Criminal History? <input type="checkbox"/>	
	Vehicle Make		Model:	Year:	

S	Last Name		First Name		M.I.
	AKA Last Name		First Name		M.I.
	Sex: Race:	Street Address:		City	State & Zip Code:
	Work Phone:	Home Phone:	Social Security #:	Driver's License #:	
	Age: D.O.B.	Height: Weight:	FBI #	CII #	
	Booking #	Primary Charge:		Secondary Charge:	
	Coroner Case? <input type="checkbox"/>	Coroner Case #	Intoxication/Drug Usage? <input type="checkbox"/>	Substance Used:	
	Armed? <input type="checkbox"/>	Apprehended? <input type="checkbox"/>	Mental Illness? <input type="checkbox"/>	Criminal History? <input type="checkbox"/>	
	Vehicle Make		Model:	Year:	

SUPPLEMENTAL EMPLOYEE WITNESSES

Los Angeles County Sheriff's Department

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Employee Witnesses			
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	
Last Name	First Name	M.I.	
Street Address	Zip Code	Work Ph	Home Ph
# [REDACTED] LA County Deputy Sheriff		323-881-7800	